

Missouri Ethics Commission (MEC)
PO Box 1370, Jefferson City MO 65102, (800) 392-8660, www.mec.mo.gov

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Statement of Committee Organization

1.	Statement Information			
	Date: 8-24-16			
	Type: New Amended (if amending, enter MEC ID () 43 40 & section changed			
2.				
Committee to elect Jon Schulssler				
,	9212 Hwy BB, Hillsboro		(<u>636)</u> 285-9810 Telephone Number	
		Teffenson County Clerk or Board of Election Commissio	·	
	Official Committee Email Address		-	
	Committee Type: Campaign Candidate Continuing (PAC) Debt Service Explo	pratory Political Party	
3. Treasurer/Deputy Treasurer Information				
Fenn E. Johnson Dr. Treasurer's Name (First & Last) Or 1110 - MO 1110 - OS 1000				
	Deputy Treasurer's Name (if one appointed)	Deputy Treasurer's Email Address (optional)		
	Deputy Treasurer's Mailing Address, City, State, & Zip	Dep. Treasurer's Home Telephone Number	Dep. Treasurer's Work Telephone Number	
4.	Additional Committee Information			
	Thomas Schussler, Chairman Additional Committee Officer's Name & Title (if any)	9212 Huy BB, I Additional Committee Officer's Mailing Addre	thustovo MO6305	
	MQ VOL Gov BOST Reform Connected Organization's Name (if any)	\mathcal{F}	•	
	Connected Organization's Name (if any)	Source A Room Connected Organization's Mailing Address, Ci	ty, State, & Zip	
	CANDIDATES: Do you have more than one candidate committee?	Yes (refer to instructions on b	oack) 🔀 No	
5.	Official Bank Account Information (required by all committees)			
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5.	Candidate Supported or Opposed (candidate committees must	include self, if candidate)		
	Name & Mailing Address, City, State & Zip of Candidate (MO \$ 3090)	9 (<u>636) 5 2 4 - 12 8 5</u> Telephone Number (Candidate Committees O	()	
	11-8-16 State Representative	District III	Support	
	Election Date Office Sought & Political Subdivision	Political Party TwDO.	Support or Oppose	
7.	Ballot Measure Supported or Opposed (campaign committees m	ust complete this section)		
	Name of Ballot Measure	Election Date & Political Subdivision	Support or Oppose	
3.	Signature(s) Check certification(s) & sign (required by all committees)			
	I affirm and attest under penalty of perjury that information and facts in this report are complete, true, and accurate. I			
further acknowledge that Lam aware that any false statement or declaration made herein is punishable under Ch. 575 RSMo.				
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•••	Committee Treasurer (Candidate (Candidate Committees Only)	mat accounted p. 4 to	

Packet (Rev. 11/2014)

Missouri Ffhics Commission

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